



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 2671

SERIAL NUMBER 10/653,719	FILING DATE 09/02/2003 RULE	CLASS 600	GROUP ART UNIT 3739	ATTORNEY DOCKET NO. MMS-2E CON 3
-----------------------------	---------------------------------------	--------------	------------------------	--

APPLICANTS

David T. Chen, Somerville, MA;
 Steven D. Pieper, Thetford Center, VT;
 Michael A. McKenna, Cambridge, MA;

** CONTINUING DATA ***** *✓*

This application is a CON of 09/874,869 06/05/2001 PAT 6,612,980
 which is a CON of 09/111,431 07/07/1998 PAT 6,241,657
 which is a CON of 08/505,587 07/24/1995 PAT 5,776,050

** FOREIGN APPLICATIONS ***** *None*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 12/10/2003

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>[Signature]</i> Examiner's Signature Initials	STATE OR COUNTRY MA	SHEETS DRAWING 11	TOTAL CLAIMS 24	INDEPENDENT CLAIMS 3
--	--	---------------------------	-------------------------	-----------------------	----------------------------

ADDRESS
 Pandiscio & Pandiscio
 470 Totten Pond Road
 Waltham, MA
 02451

TITLE
 ANATOMICAL VISUALIZATION SYSTEM

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
------------	---	--

<p>RECEIVED 972</p>		<table border="1"> <tr> <td data-bbox="1026 151 1466 205"> <input type="checkbox"/> 1.18 Fees (Issue) </td> </tr> <tr> <td data-bbox="1026 205 1466 260"> <input type="checkbox"/> Other _____ </td> </tr> <tr> <td data-bbox="1026 260 1466 315"> <input type="checkbox"/> Credit _____ </td> </tr> </table>	<input type="checkbox"/> 1.18 Fees (Issue)	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit _____
<input type="checkbox"/> 1.18 Fees (Issue)					
<input type="checkbox"/> Other _____					
<input type="checkbox"/> Credit _____					